

## Harnett County Application for Pushcarts

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Name of pushcart: \_\_\_\_\_

License or Tag #: \_\_\_\_\_

Set up location(s): 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Hours of operation: \_\_\_\_\_

Commissary used: \_\_\_\_\_

Commissary address: \_\_\_\_\_

Commissary contact: \_\_\_\_\_

Describe equipment on cart to hold cold and hot foods: \_\_\_\_\_

Describe covers used to protect food on the pushcart: \_\_\_\_\_

Type of sanitizer used: \_\_\_\_\_ Test strips available?: \_\_\_\_\_

Metal-stem thermometer available? \_\_\_\_\_

Description of operation at Commissary: \_\_\_\_\_

What times of the day would you service the push cart at the Commissary? \_\_\_\_\_

Describe access to a potable water source and the disposal of waste water for push cart (if applicable) \_\_\_\_\_

Where will food be stored at the Commissary? \_\_\_\_\_

Where will dry goods and utensils be stored at the Commissary? \_\_\_\_\_

Does Commissary operation hours coincide with pushcart hours? \_\_\_\_\_

List all foods to be served by the pushcart: \_\_\_\_\_

Where will the pushcart be stored when not in use? \_\_\_\_\_

**Checklist:** \_\_\_\_\_ Push cart application

\_\_\_\_\_ Pushcart schematics or pictures

\_\_\_\_\_ Commissary Agreement Form

\_\_\_\_\_ \$250 plan review fee